



State of New Hampshire 2015 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/18/2015

Business ID: 196184

William M. Gardner

Secretary of State

SMITH-WEISS SHEPARD, P.C.

ATTN: ELAINE L. DAVIDSON, 47 FACTORY STREET, PO BOX 388
NASHUA, NH 03061

ADDRESS OF PRINCIPAL OFFICE:

47 FACTORY ST, PO BOX 388

NASHUA, NH 03061

REGISTERED AGENT AND OFFICE:

SHEPARD, ROBERT M, ESQ

47 FACTORY STREET

NASHUA, NH 03060

ENTITY TYPE: PROFESSIONAL CORPORATION

BUSINESS ID: 196184

STATE OF DOMICILE: NEW HAMPSHIRE

LAW FIRM

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address 47 FACTORY STREET, PO BOX 388, NASHUA, NH 03061-0388

☐ The new principal office address

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Brenda C. Smith-Weiss

STREET 47 Factory St.

CITY/STATE/ZIP Nashua NH 03060

V-PRES. Robert M. Shepard

STREET 47 Factory St.

CITY/STATE/ZIP Nashua NH 03060

SEC'Y. Robert M. Shepard

STREET 47 Factory St.

CITY/STATE/ZIP Nashua NH 03060

NAME

STREET

CITY/STATE/ZIP

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Brenda C. Smith-Weiss

STREET 47 Factory St.

CITY/STATE/ZIP Nashua NH 03060

DIR. Robert M. Shepard

STREET 47 Factory St.

CITY/STATE/ZIP Nashua NH 03060

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

All the shareholders, and as many of the directors and officers as may be required under RSA 294-A:20, are qualified persons with respect to the corporation.

Sign here: Robert M Shepard

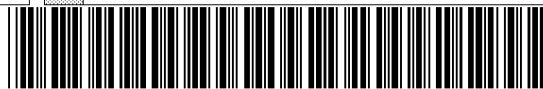
Please print name and title of signer: Robert M Shepard / VICE PRESIDENT

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



019618420151008

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301